ADMINISTRATIVE PROCEDURES	Mississippi Secretary of State 700 North Street P. O. Box 136, Jackson, MS 39	205-0136	
AGENCY NAME Public Employees' Retirement System	CONTACT PERSON Jane L. Mapp	TELEPHONE NUMBER 601-359-3592	
ADDRESS 429 Mississippi Street	CITY Jackson	STATE ZIP MS 39201	
IMapp@pers.ms.gov D.	Name or number of rule(s): ATE Regulation 65 4/29/2011		
to clarify earned compensation from incorporate various provisions of specific legal authority authorizing the		or retirement. Staff would like to	is
ORAL PROCEEDING:	spended by the proposed rule: Regulation 65		
An oral proceeding is scheduled for X Presently, an oral proceeding is not s if an oral proceeding is not scheduled, an oral protein (10) or more persons. The written request st notice of proposed rule adoption and should includent or attorney, the name, address, email addressment period, written submissions including a ECONOMIC IMPACT STATEMENT:  X Economic impact statement not required.	poceeding must be held if a written request for an oral proce mould be submitted to the agency contact person at the about the name, address, email address, and telephone numbers, and telephone numbers, and telephone number of the party or parties you reprorguments, data, and views on the proposed rule/amendmented for this rule.  Concise summary of the proposed su	eding is submitted by a political subdivision, an agency ve address within twenty (20) days after the filing of the request; and, if you are essent. At any time within the twenty-five (25) day put nt/repeal may be submitted to the filing agency.  economic impact statement attached.  FINAL ACTION ON RULES  Date Proposed Rule Filed:	his e ar
Original filing Renewal of effectiveness To be in effect in days Effective date: Immediately upon filing Other (specify):	Action proposed:  X New rule(s)  Amendment to existing rule(s)  Repeal of existing rule(s)  Adoption by reference  Proposed final effective date:  30 days after filing  X Other (specify): August 1, 2011	Action taken:  Adopted with no changes in text  Adopted with changes  Adopted by reference  Withdrawn  Repeal adopted as proposed  Effective date:  30 days after filing  Other (specify):	
Printed name and Title of person au Signature of person authorized to fil	thorized to file rules: Jane L. Mapp, Special e rules: /s/	Assistant Attorney General	
OFFICIAL FILING STAMP	DO NOT WRITE BELOW THIS LINE OFFICIAL FILING STAMP	OFFICIAL FILING STAMP	

The entire text of the Proposed Rule including the text of any rule being amended or changed is attached.

Accepted for filing by

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